

NPM #18: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Impact on National Outcome Measures: NPM #18 relates to National Outcome Measures #1 Infant mortality rate, #2 Disparity between Black and White infant mortality rates, #3 Neonatal mortality rate, and #5 Perinatal mortality rate. Early entry into prenatal care is associated with improved perinatal outcomes. All of the activities identified below focus on improving key perinatal indicators, including early entry into prenatal care.

a) Report of 2002 Major Activities

1. Title V MCH/CSHCN Program MCH Funded Perinatal Service—Enabling Services—Pregnant women, mothers, infants

See NPM #15 for 2002 activities.

For women who received Perinatal Care Coordination services, 74.0% (1,825/2,466) received first trimester prenatal care, 16.8% (415/2,466) began care in the 2nd trimester, 2.4% (59/2,466) began prenatal care in the 3rd trimester, 3.5% (87/2,466) received no care, and for 3.2% (80/2,466) entry into prenatal care was unknown.

2. Prenatal Care Coordination (PNCC)—Enabling Services—Pregnant women, mothers, infants

Prenatal Care Coordination services are available to Medicaid-eligible pregnant women with a high risk for adverse pregnancy outcomes. PNCC helps eligible women gain access to medical, social, educational, and other services related to pregnancy. Primary objectives are to ensure that women at high risk are identified as early as possible in their pregnancy and receive early and continuous prenatal care. Title V Program staff provided training and technical assistance to individual and regional groups of PNCC providers.

In State Fiscal Year 2002 8,583 women received PNCC services from 98 providers. Some PNCC providers entered data into the Wisconsin MCH Data System. For this subset of women receiving PNCC services, 77.6% (780/1,005) received first trimester prenatal care, 9.7% (97/1,005) began care in the 2nd trimester, 0.3% (3/1,005) began prenatal care in the 3rd trimester, 9.9% (99/1,005) received no care, and for 2.6% (26/1,005) entry into prenatal care was unknown.

See NPM #15 for additional information.

3. Healthy Babies in Wisconsin: A Call to Action—Infrastructure Building Services—Pregnant women, mothers, infants

Planning continued for Healthy Babies in Wisconsin: A Call to Action.

4. Federal Healthy Start Projects in Wisconsin—Population Based Services—Pregnant women, mothers, infants

Title V Program staff participated in Consortia meetings at both Healthy Start sites, FIMR meetings in Milwaukee, and the Families Helping Families Gathering.

b) Current 2003 Activities

1. **Title V MCH/CSHCN Program MCH Funded Perinatal Service—Enabling Services—Pregnant women, mothers, infants**

For 2003, the Title V Program funded 36 local agencies (LPHDs and community-based organizations) with 45 objectives to provide perinatal care coordination services, prenatal/postnatal education, and promotion of early entry into prenatal care and prenatal smoking cessation.

2. **Coordination with WIC and the State Immunization Programs and Enrollment in the Wisconsin Immunization Registry (WIR)—Infrastructure Building Services—Pregnant women, mothers, infants, children, including CSHCN**

The Title V Program is working with the DHCF to revise the PNCC Pregnancy Questionnaire. This tool identifies women eligible for the PNCC benefit and assesses needs for ongoing services. A revised assessment tool will be strength-based, coordinated with WIC, allow for data collection, and be based on current information. Another PNCC related activity for 2003 is an educational session for case managers. In addition, Title V staff are exploring grant opportunities to enhance WIC and PNCC collaboration. Activities may include identifying barriers to participation and best practices for service delivery.

3. **Healthy Babies in Wisconsin: A Call to Action—Infrastructure Building Services—Pregnant women, mothers, infants**

Healthy Babies in Wisconsin: A Call to Action, to be held July 15, 2003 in central Wisconsin will bring together 300-400 public health professionals, consumers, health care providers/HMOs, and representatives from community-based organizations.

4. **Federal Healthy Start Projects in Wisconsin—Population-Based Services—Pregnant women, mothers, infants**

2002 activities continued. We will disseminate and promote the recommendations from the FIMR report and work closely with both Healthy Start Projects in the planning and sustainability of the Healthy Babies in Wisconsin summit.

c) 2004 Plan/Application

1. **Title V MCH/CSHCN Program MCH Funded Perinatal Service—Enabling Services—Pregnant women, mothers, infants**

Title V MCH/CSHCN Program funds will continue to be provided to local agencies for services that support early entry into prenatal care.

2. **Prenatal Care Coordination (PNCC)—Enabling Services—Pregnant women, mothers, infants**

The Title V MCH/CSHCN Program will continue to work with the DHCF to provide support and technical assistance for the PNCC program and providers. Outreach and quality initiatives will continue to promote early entry into prenatal care. We will also work with DHCF on the Improving Birth Outcomes Project a collaborative project between the Medicaid program and participating HMOs. The intent is to address poor birth outcomes among the Medicaid population with projects such as incentives for early entry into prenatal care.

3. Healthy Babies in Wisconsin: A Call to Action—Infrastructure Building Services—Pregnant women, mothers, infants

Our long term goals to improve perinatal outcomes and eliminate disparities in infant mortality cannot be achieved with a one-day summit. Healthy Babies in Wisconsin: A Call to Action will provide an opportunity for strategic thinking and preliminary planning. Following the summit, regional forums will be held to mobilize additional partners at the local level to continue planning for solutions that are based on regional data and sustainable over time.

4. Federal Healthy Start Projects in Wisconsin—Population-Based Services—Pregnant women, mothers, infants

The Title V MCH/CSHCN Program will continue its commitment to participating in the Healthy Start programs with the Milwaukee Healthy Beginnings Project and the Honoring Our Children with a Healthy Start project. An important partnership will revolve around sustaining activities following Healthy Babies in Wisconsin: A Call to Action.